

unctional Integration Implementation A Roadmap to Success"

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Mission:

The NCA Military Health System (NCA MHS) employs joint strategies among the Services to integrate the delivery of the health benefit to MHS beneficiaries by providing health support for the full range of military operations and sustaining the health of all those entrusted to our care. We maximize our operational readiness and keep the Uniformed Services mission-ready.



Shared Vision

 We envision and are committed to one integrated health system which leverages the assets of all DoD health care treatment facilities in the National Capital Area (NCA). The triservice Walter Reed National Military Medical Center at Bethesda will be a worldwide military referral center and together with the Uniformed Services University of the Health Sciences (USUHS) will represent the core of this integrated health system. All tri-service facilities in the NCA and USUHS will serve as a premier academic medical system focused on delivering the highest quality care, distinguished health professional education, and exemplary clinical and translational research.

tegration vs. Consolidation

- OBJECTIVE: FULLY FUNCTIONAL INTEGRATION
- CONSOLIDATION: Combining systems, processes, services or institutions based on commonality while retaining original identity of components.
- INTEGRATION: Combining systems, processes, services or institutions based on commonality, creating an entirely new identity organization which uses the best parts/practices from the original components.

Objective #1:

Decisions are many and information is communicated across the NCA

at the appropriate levels. The process, including planning and research,

is thorough, timely, and minimizes surprises.

- Identify functional areas of responsibility & develop appropriate teams.
- Develop goals and objectives.
- Develop a systematic, reporting, decision making and communication process.
- 4. Identify methods for dispute resolution.
- 5. Communicate success and team outcomes/information periodically to the NCA.

Objective #2:

Integrate ical departments of General Surgery, Orthopedics,

and Internal Medicine by Sept 30, 2007, as evidenced by a single department head, a single training program, a single business plan,

and functionally a single budget.

- 1. Establish stakeholder working groups.
- 2. Describe and validate departmental/program scope of services.
- 3. Define selection process.
- 4. Select service and departmental chiefs and program directors.
- 5. Develop and execute business plans.
- 6. Functionally develop single budget for each of the departments.

Objective #3:

Define relationships and responsibilities of leadership positions at the Academic Medical Center. Ensure the selection process for each position is inclusive and chooses the best qualified person.

- Identify and crosswalk current leadership positions: Department and program Chairs.
- Analysis of consolidated document and identify department discrepancies.
- Formulate PD for new leadership positions.
- Establish leadership measures of effectiveness for:
 - Clinical
 - Fiscal
 - Quality
 - Personnel
 - Education
 - Research

bjective #4:

Guarantee a Tri-Service, integrated health system throughout the NCA that supports a medical readiness platform and beneficiary care. This objective will be measured by; (1) the establishment of an integrated regional approach to focus on the delivery of a joint medical readiness platform, and (2) the establishment of command integration teams.

- 1. Establish Joint Service Phase-in Plan working group.
- 2. Identify all Tri-Service readiness platforms.
- ID market requirements (met/unmet)/GWOT requirements/Service unique requirements.
- 4. ID Health Program Education (HPE) requirements.
- 5. Coordinate assignment of personnel into joint clinical positions across the NCA.
- 6. ID MTF staffing across the NCA.
- 7. Monitor progress of integration of Tri-Service readiness training platforms in the NCA.
- 8. Establish interoperability/MTF Integration Teams

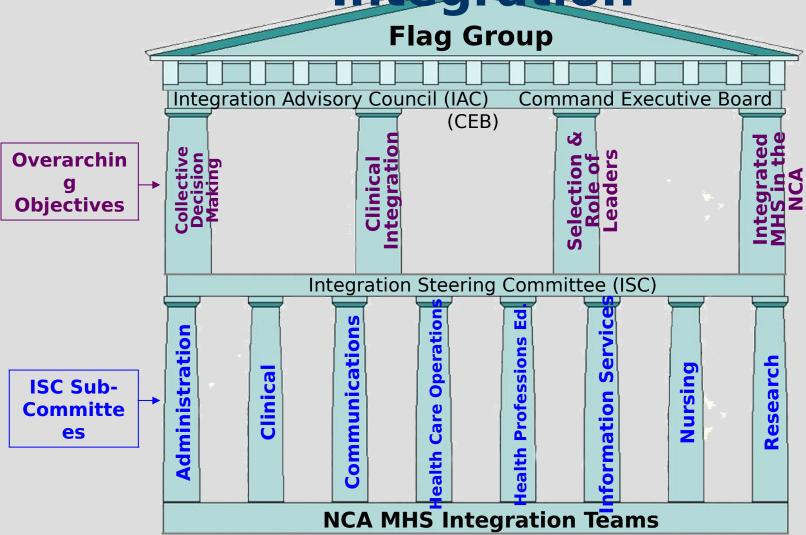


Functional Integration

Flag Group Integration Advisory Council (IAC) **Command Executive Board** (CEB) **Overarchin** g Objectives



Functional Integration





War Fighter/Beneficiaries/Commu

Front Line Personnel

1st Line Supervisors
Senior mid-level leaders
Sub-committees

OI

IAC

CEB

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